

Provider Reference Guide- provides an overview of the tabs in ProviderConnect and associated Avatar forms.

ProviderConnect is a Web-based clinician access software portal for providers that is accessed by any Web browser. The site transmits client treatment and billing data through a Web browser safely and securely. The site consists of standard and customized forms (tabs) for the Milwaukee County Provider Community.

Tab or Section	Description
Lookup Client	Retrieve client information for clients associated with a provider. Providers can view and work with clients in their agency. Only clients with authorization requests, pended or approved authorizations, and/or provider-initiated Admissions will display.
Demographics	 Providers can edit client demographic information. Client demographic information displays for all agencies associated with the client. New client records are entered in ProviderConnect when a client is admitted in Avatar (Admission form). When client demographic data is edited in Avatar (Admission or Update Client Demographic Data form) the data is updated in ProviderConnect.
Financial Eligibility	The Financial Eligibility tab gives providers access to view or add client coverages and guarantor information.
Authorizations	 Service authorization requests are submitted through ProviderConnect. Authorization requests are reviewed and processed in Avatar. Providers can view service authorization requests, edit, and create new authorization requests in ProviderConnect. Service authorizations and service authorization requests can be reviewed, edited, and deleted in Avatar. Submitting a service authorization in the Service Authorization form (Avatar) assigns a contracting provider ('Provider To Be Authorized' field) to a client. When a service authorization request is filed in ProviderConnect it is sent to Avatar with a status of Pending. Files can be attached to service authorizations in this form and through the ProviderConnect File Attach form (Avatar). The client demographic record in the service authorization request (ProviderConnect) is created using the most recent client information in Avatar (Admission or Update Client Data form).

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Tab or Section	Description
Treatment	View and create client treatment services for clients associated with the provider's agency. Providers can view treatment information for a client associated with any agency.
Provider Admission	The Provider Admission link in ProviderConnect has the same functionality as the Admission form in Avatar.
	ProviderConnect coordinating providers can create outpatient provider admissions.
Attachments	Attach files to be associated with a service authorization. Documents and images can be uploaded and associated with an authorization. Service authorizations that have attached files display Click the icon to view the attachment.
Provider Diagnosis	The Provider Diagnosis link in ProviderConnect provides the same functionality as the Diagnosis form in Avatar.
(ICD-10)	ProviderConnect coordinating providers can create provider diagnoses.
CARS Assessment Summary	The summary is completed in Avatar and available as a resource in ProviderConnect. Gathering information in the comprehensive assessment is only the beginning of the recovery journey. Integration and summary of data and clinical formulation is an essential step in the process of developing a person-centered recovery plan. The assessment summary is about the how and why. It is about understanding the problem from the perspective of the individual and family, as well as understanding their needs, strengths and resources. The assessment summary is the foundation for identifying barriers and developing goals/objectives.
CARS Client Change/Upd Form	There are certain items on the demographic form in Provider Connect which are not captured for the reporting system CARS uses, thus the client change/update form. This alerts CARS staff for changes to certain items like insurance, SSN, etc. Client Change/Update Form is collected as needed but should be reviewed each time a PPS bundle is submitted.
CARS Referral Form	The CARS Referral Form is read-only in Provider Connect and may be referenced for PPS bundle submission. This form is completed at Access Points at the time of intake.
CARS SAR Justification	The Service Authorization Request Justification (SAR-J) provides the rationalization for why a service is being re-authorized. The SAR-J allows the provider to explain his/her rationale for requesting funding based on ASAM criteria.
Notification of Death	This form is required by MCBD CARS. The data submitted in the form enables CARS to identify, respond to, monitor, and understand the deaths of clients that occur while enrolled in CARS services. This data helps CARS to develop quality improvement projects, identify important emerging trends, and improve the quality of life and health of the population enrolled in CARS services.

Tab or Section	Description
PPS/NOMS Supplemental	The PPS/NOMS Supplemental form is required by the county. The information captured is meant to give a more comprehensive picture of consumer outcomes beyond state required information. If the consumer's episode elapsed 6 months, a follow-up should be completed. The data from this form is used for a multitude of measures including dashboards, contract performance measures, and more. • Includes information pulled forward from other PPS forms to aid in accurate data entry (if filled out in the specified order).
State of Wisconsin PPS AODA Module	This form is required by the state and federal level for authorized or paid for substance abuse services. Submission of this form is expected at admission to the episode and at discharge of the episode. If the consumer's episode elapsed 6 months, a follow-up should be completed.
State of Wisconsin PPS General Information	This form is required by the state and federal level. The form captures basic demographic information and other fields including veteran status, employment status, and living status. This is meant to help portray outcome data submitted to the State of Wisconsin.
State of Wisconsin PPS Mental Health Module	This form is required by the state and federal level for authorized or paid for mental health services. Submission of this form is expected at admission to the episode and at discharge of the episode. If the consumer's episode elapsed 6 months, a follow-up should be completed.
Wait List Contact Attempts	This form records the amount of attempts a provider tries to engage the consumer on the waitlist for a service program.